

**PART 3: SITE/ATTENDANCE CENTER APPLICATION
SCHOOL NUTRITION PROGRAMS
(COMPLETE ONE FOR EACH SITE)**

A. Name of Local Agency _____ **Number** _____

B. List site name (as it is listed in Educational Directory or as it appears on the license).

Physical Address _____

C. Name and title of the person responsible for food service at the site:

_____ Check if new ☐

Phone number _____ Fax number _____

E-mail _____

D. Type of site:

- ☐ Single building with multiple attendance centers,
grades included as checked and listed below
- ☐ Pre-school
- ☐ Head Start/Early Head Start
- ☐ Elementary school: grades _____
- ☐ Middle school/junior high school: grades _____
- ☐ Senior high school: grades _____
- ☐ Residential child care institution: ages _____
- ☐ Special education school site:

E. Method by which meals will be provided to this site (check all that apply):

- ☐ Prepared and served at this site
Does this site ship (satellite) meals to another site? ☐ yes ☐ no
- ☐ Preparation at central or base kitchen and shipped to this site
- ☐ Students walk from this attendance center to another attendance center to eat their meals

F. Accreditation/Licensing:

Is site/center licensed or accredited by federal, state, or local authority? yes no
(If not, contact Child and Adult Nutrition Services. The center is not eligible to participate until
licensing or accreditation is obtained.)

G. Operating Data:

1. Hours of operation: From _____ To _____

2 List any full weeks during which the Program will not operate: (Include dates of closing and reopening)

From ____/____/____ To ____/____/____ From ____/____/____ To ____/____/____

From ____/____/____ To ____/____/____ From ____/____/____ To ____/____/____

H. Offer Vs Serve:

1. LUNCH MEAL SERVICE Offer versus Serve is mandatory at the high school level for lunch. It is optional at the lower grades. Check the following applicable statement(s) and indicate which grades they pertain to if different than grades listed for the attendance center in item D.

- | | Jr Hi/MS | Elem |
|--|---------------|-------|
| a. Students must take all items in full portion. | Grades: _____ | _____ |
| b. Students may decline 1 item. | Grades: _____ | _____ |
| c. Students may decline 2 items. | Grades: _____ | _____ |

2. BREAKFAST MEAL SERVICE Offer versus Serve is optional at all grade levels in the breakfast program. Check the following applicable statement(s) and indicate which grade(s) they pertain to if different than grades listed for the attendance center in item D

- | | H.S. | Jr Hi/MS | Elem |
|---|-------|----------|-------|
| a. Students must take all items in full portion | _____ | _____ | _____ |
| b. Students may decline 1 item | _____ | _____ | _____ |

I. Meal Service Information

	Service Time	Service Time	Price	Price	Price
Meal type	From	To	Reduced	Full	Adult
Breakfast	<input type="checkbox"/> not offered		<input type="checkbox"/> Non-pricing	<input type="checkbox"/> Non-pricing	
Lunch	<input type="checkbox"/> not offered		<input type="checkbox"/> Non-pricing	<input type="checkbox"/> Non-pricing	
Milk-SMP	<input type="checkbox"/> not offered		Not Applicable	<input type="checkbox"/> Non-pricing	
Snack	<input type="checkbox"/> not offered		<input type="checkbox"/> Non-pricing	<input type="checkbox"/> Non-pricing	

J. Snack After School Operating Data –

1. Does the local agency offer an after-school program at this site that will include serving a snack to be claimed for reimbursement under NSLP?
- yes (complete next page) no (skip next page)

J. Snack After School Operating Data – Continued

2. Does the local agency own/operate the site in which the program is operated? yes no
3. Is this site licensed by Dept. of Social Services? no yes (attach copy of license)
4. Pricing Structure:
- a. The snack will be offered as a pricing program: yes no
- b. Are at least 50% of children at this site eligible for free and/or reduced price meals as of the last October? yes no
- c. If it is 50% eligible, all participating children will be served snack at no charge? yes no
- State agency verification
 Init _____ %
5. Is the primary purpose of this program to provide children with regularly scheduled educational or enrichment activities in an organized, structured and supervised environment? yes no
6. Describe regularly scheduled education or enrichment activities that will be offered as a part of the after-school activity program.
7. The snack program will only be offered after the end of the scheduled school day. yes no
8. Is the program open to all, limited only by space, and/or security considerations, and/or licensing requirements? yes no
9. Describe the method of sign-in for children attending the program:
 ____ Sign in/sign out roster
 ____ Other (describe)
10. Circle the days the program will be offered: M Tu W Th F Sa Su
 If operating dates are different than lunch program, list dates to start _____ & end _____
11. The hours the site operate will be: Begin _____ End _____
 (Provide additional information if there are any differences by day.)
12. Reimbursement may be claimed for snacks served to all children through the age of 18 as well as for children who turn 19 during the school year. Circle the ages of children whom this program will serve:
 6 7 8 9 10 11 12 13 14 15 16 17 18
13. Check below the following required records that the SFA will maintain for each month of operation:
- ____ Applications for all children for whom free and reduced priced snacks are claimed.
- ____ Documentation for each day of child's attendance
- ____ Documentation of compliance with meal pattern requirements
- ____ Documentation on a production record of menus, dates, foods prepared and served, etc.
- Meal counts will be completed at point of service:
- ____ by total for sites qualifying for free reimbursement for all children
- ____ by type (Free and/or Reduced) for other sites
- ____ by check-off name roster
- ____ by other method (describe)